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| PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 | | | | | | | | Application or Docket Number 10/538,769 | | | ing Date 04/2006 | ☐ To be Mailed |
|--|---|---|--|---|--------------|---------------------------------------|---|--|------------------------|----|-----------------------|------------------------|
| | Al | PPLICATION | AS FILE | OTHER THAN SMALL ENTITY ☑ OR SMALL ENTITY | | | | | | | | |
| FOR | | | IUMBER FI | .ED | NUMBER EXTRA | | П | RATE (\$) | FEE (\$) | | RATE (\$) | FEE (\$) |
| | BASIC FEE (37 CFR 1.16(a), (b), | or (c)) | N/A | N/A | | N/A | | N/A | | ı | N/A | |
| | SEARCH FEE (37 CFR 1 16(k), (i), | or (m)) | N/A | | N/A | | | N/A | | l | N/A | |
| | EXAMINATION FE (37 CFR 1.16(a), (p), | | N/A | | N/A | | | N/A | | l | N/A | |
| | TAL CLAIMS CFR 1.16(i)) | | minus 20 = * | | | | П | x s = | | OR | x s = | |
| IND (37 | EPENDENT CLAIM CFR 1.16(h)) | IS | minus 3 = * | | | | | X \$ = | | 1 | X \$ = | |
| | APPLICATION SIZE (37 CFR 1.16(s)) | FEE she is \$: add | If the specification and drawings sheets of paper, the application is \$250 (\$125 for small entity) for additional 50 sheets or fraction 35 U.S.C. 41(a)(1)(G) and 37 C | | | size fee due r each hereof. See | | | | | | |
| MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j)) | | | | | | | П | | | l | | |
| * If the difference in column 1 is less than zero, enter "0" in column 2. | | | | | | | | TOTAL | | | TOTAL | |
| APPLICATION AS AMENDED – PART II OTHER THAN (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY GLAMS HIGHEST | | | | | | | | | | | | |
| AMENDMENT | 03/04/2011 | REMAINING AFTER AMENDMENT | | NUMBER PREVIOUSLY PAID FOR | | PRESENT EXTRA | | RATE (\$) | ADDITIONAL FEE (\$) | | RATE (\$) | ADDITIONAL FEE (\$) |
| | Total (37 CFR 1-16()) | * 16 | Minus | ** 22 | | = 0 | П | X \$26 = | 0 | OR | x s = | |
| | Independent (37 CFR 1.16(h)) | • 1 | Minus | 3 | | - 0 | П | X \$110 = | 0 | OR | X S = | |
| | Application Size Fee (37 CFR 1.16(s)) | | | | | | | | | | | |
| ľ | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j)) | | | | | | | | | OR | | |
| | | | | | | | | TOTAL ADD'L FEE | 0 | OR | TOTAL ADD'L FEE | |
| (Column 1) (Column 2) (Column 3) | | | | | | | | | | | | |
| AMENDMENT | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHES' NUMBER PREVIOUS PAID FOI | R SLY | PRESENT EXTRA | | RATE (\$) | ADDITIONAL FEE (\$) | | RATE (\$) | ADDITIONAL FEE (\$) |
| | Total (37 CFR 1,16()) | | Minus | | | - | П | X \$ = | | OR | x s = | |
| M | Independent (37 CFR 1 16(h)) | | Minus | *** | | - | ı | X \$ = | | OR | x s = | |
| | Application Size Fee (37 CFR 1.16(s)) | | | | | | | | | l | | |
| AM | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j)) | | | | | | | TOTAL | | OR | | |
| * If the entry in column 1 is less than the entry in column 2, write *0" in column 3. | | | | | | | | | etrumont Ex | OR | TOTAL ADD'L FEE | |
| I'the entry in column 1 is less train the entry in column 2, wate 0 in column 3. Legal Instrument Examiner: "If the "Highest Number Perviously Paid For NT HIS SPACE is less than 30, enter "20" "If the "Highest Number Perviously Paid For NT HIS SPACE is less than 3, enter "3" I'the "Highest Number Perviously Paid For NT HIS SPACE is less than 3, enter "3" I'the "Highest Number Perviously Paid For NT HIS SPACE is less than 3, enter "3" I'the "Highest Number Perviously Paid For NT HIS SPACE is less than 3, enter "3" I'the "Highest Number Perviously Paid For NT HIS SPACE is less than 3, enter "3" I'the "Highest Number Perviously Paid For NT HIS SPACE is less than 3, enter "3" I'the "Highest Number Perviously Paid For NT HIS SPACE is less than 3, enter "3" I'the "Highest Number Perviously Paid For NT HIS SPACE is less than 3, enter "3" I'the "Highest Number Perviously Paid For NT HIS SPACE is less than 3, enter "3" I'the "Highest Number Perviously Paid For NT HIS SPACE is less than 3, enter "3" I'the "Highest Number Perviously Paid For NT HIS SPACE is less than 3, enter "3" I'the "Highest Number Perviously Paid For NT HIS SPACE is less than 3, enter "3" I'the "Highest Number Perviously Paid For NT HIS SPACE is less than 3, enter "3" I'the "Highest Number Perviously Paid For NT HIS SPACE is less than 3, enter "3" I'the "Highest Number Perviously Paid For NT HIS SPACE is less than 3, enter "3" I'the "Highest Number Perviously Paid For NT HIS SPACE is less than 3, enter "3" I'the "Highest Number Perviously Paid For NT HIS SPACE is less than 3, enter "3" I'the "Highest Number Perviously Paid For NT HIS SPACE is less than 3, enter "3" I'the "Highest Number Perviously Paid For NT HIS SPACE is less than 3, enter "3" I'the "Highest Number Perviously Paid For NT HIS SPACE is less than 3, enter "3" I'the "Highest Number Perviously Paid For NT HIS SPACE is less than 3, enter "3" I'the "Highest Number Perviously Paid For NT HIS SPACE is less than 3, enter "3" I'the "Highest Number Perviously Paid For NT | | | | | | | | | | | | |

This collection of Information is required by 37 CFR 1.16. The information is required to obtain or retain a barref flat yfte public which is to file (and by the USPTO) to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of the time you require to complete his long and or suggestion for neducing the thindship, should be sent to the Cited information Officer. U.S. Patient and Trademark Office, U.S. Department of Commence, P.O. Box 1450, Alexandrius, W. 22313-1450, D.O. NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.